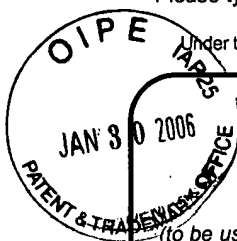


JH

Please type a plus sign (+) inside this box → ☐

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.



TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number	10/764,125		
	Filing Date	January 23, 2004	
	First Named Inventor	Zdeblick, M.	
	Group Art Unit	3766	
Examiner Name	Bockelman, M.		
Total Number of Pages in This Submission	5	Attorney Docket Number	021308-000710US

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): 1) Return receipt postcard 2) Four (4) references 3) Written Opinion from PCT case
Remarks The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430. Total number of pages does not include cited references.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm and Individual name	Townsend and Townsend and Crew LLP David N. Slone Reg No. 28,572	
Signature	<i>David Slone</i>	
Date	January 20, 2006	

CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this date: January 26, 2006			
Typed or printed name	Christopher R. Fitting	<i>Ch Fitting</i>	
Signature		Date	January 26, 2006

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231. 60683575 v1

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to:

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

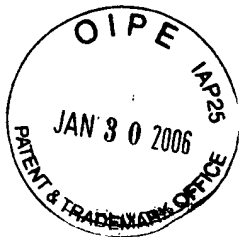
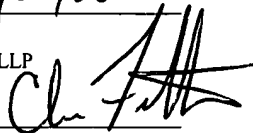
PATENT
Attorney Docket No.: 021308-000710US
Client Reference No.: PRO-4

On

1/26/06

TOWNSEND and TOWNSEND and CREW LLP

By:



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

ZDEBLICK et al.

Application No.: 10/764,125

Filed: January 23, 2004

For: METHOD AND SYSTEM FOR
REMOTE HEMODYNAMIC
MONITORING

Examiner: Bockelman, M.

Art Unit: 3766

SUPPLEMENTAL INFORMATION
DISCLOSURE STATEMENT UNDER 37
CFR §1.97 and §1.98

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

The references cited on the attached PTO/SB/08A and PTO/SB/08B forms are being called to the attention of the Examiner. Copies of references AU-AX are enclosed. It is respectfully requested that the cited references be expressly considered during the prosecution of this application, and the references be made of record therein and appear among the "references cited" on any patent to issue therefrom.

Also enclosed is a copy of the Written Opinion for the corresponding PCT application.

As provided for by 37 CFR 1.97(g) and (h), no representation is being made that a search has been conducted or that this statement encompasses all the possible relevant information, and no inference should be made that the information and references cited are, or are considered to be material to patentability because they are in this statement. No inference should be made that the information and references cited are prior art merely because they are in this statement.

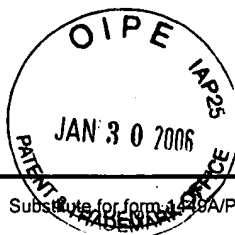
Applicant believes that no fee is required for submission of this statement. However, if a fee is required, the Commissioner is authorized to deduct such fee from the undersigned's Deposit Account No. 20-1430. Please deduct any additional fees from, or credit any overpayment to, the above-noted Deposit Account.

Respectfully submitted,

A handwritten signature in black ink that reads "David Slone". The signature is written in a cursive, flowing style.

David N. Slone
Reg. No. 28,572

TOWNSEND and TOWNSEND and CREW LLP
Two Embarcadero Center, Eighth Floor
San Francisco, California 94111-3834
Tel: 650-326-2400
Fax: 650-326-2422
DNS:crf
60683525 v1



INFORMATION DISCLOSURE STATEMENT BY APPLICANT (Use as many sheets as necessary)		Complete if Known			
		Application Number	10/764,125		
		Filing Date	January 23, 2004		
		First Named Inventor	ZDEBLICK, MARK		
		Art Unit	3766		
		Examiner Name	Bockelman, M.		
Sheet	1	of	2	Attorney Docket Number	021308-000710US

U.S. PATENT DOCUMENTS					
Examiner Initials*	Cite No. ¹	Document Number Number Kind Code ² (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
	AA	US-6,477,417 B1	11-05-2002	Levine	
	AB	US-6,477,395 B2	11-05-2002	Schuman et al.	
	AC	US-6,473,653 B1	10-29-2002	Schallhorn et al.	
	AD	US-6,418,348	07-06-2002	Witte	
	AE	US-6,370,431	04-09-2002	Stoop et al.	
	AF	US-6,301,500 B1	10-29-2001	Van Herk et al.	
	AG	US-6,264,606	07-24-2001	Ekwall et al.	
	AH	US-6,038,480	03-14-2000	Hrdlicka et al.	
	AI	US-5,999,848	12-07-1999	Gord et al.	
	AJ	US-5,913,814	06-22-1999	Zantos	
	AK	US-5,902,248	05-11-1999	Millar et al.	
	AL	US-5,423,323	06-13-1995	Orth	
	AM	US-5,035,246	07-30-1991	Heuvelmans et al.	
	AN	US-5,004,275	04-02-1991	Miller	
	AO	US-4,902,273	02-20-1990	Choy et al.	
	AP	US-4,878,898	11-07-1989	Griffin et al.	
	AQ	US-2004/0254483	12-16-2004	Zdeblick et al.	
	AR	US-2004/0193021	09-30-2004	Zdeblick et al.	
	AS	US-2004/0220637	11-04-2004	Zdeblick et al.	
	AT	US-2002/0120186	08-29-2002	Keimel	

FOREIGN PATENT DOCUMENTS								
Examiner Initials*	Cite No. ¹	Foreign Patent Document			Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T ⁶
		Country Code ³	Number ⁴	Kind Code ⁵ (if known)				
	AU	WO	2004/052182	A2, A3	06-24-2004			<input type="checkbox"/>
	AV	WO	2004/066814	A2, A3	08-12-2004			<input type="checkbox"/>
	AW	WO	2004/066817	A2, A3	08-12-2004			<input type="checkbox"/>
	AX	WO	2004/067081	A2, A3	08-12-2004			<input type="checkbox"/>

Examiner Signature		Date Considered	
--------------------	--	-----------------	--

*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. ¹ Applicant's unique citation designation number (optional). ² Kind Codes of U.S. Patent Documents at www.uspto.gov or MPEP 901.04. ³ Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). ⁴ For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. ⁵ Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST. 16 if possible. ⁶ Applicant is to place a check mark here if English language Translation is attached.

Substitute for form 1449B/PTO INFORMATION DISCLOSURE STATEMENT BY APPLICANT <i>(Use as many sheets as necessary)</i>				Complete if Known	
				Application Number	10/764,125
				Filing Date	January 23, 2004
				First Named Inventor	ZDEBLICK, MARK
				Art Unit	3766
				Examiner Name	Bockelman, M.
Sheet	2	of	2	Attorney Docket Number	021308-000710US

[illegible]

Examiner Signature		Date Considered	
-----------------------	--	--------------------	--

EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹ Applicant's unique citation designation number (optional). ² Applicant is to place a check mark here if English language Translation is attached.